

# Position Description

Read each heading carefully before proceeding. Make statements simple, brief, and complete. Be certain the form is signed. Send the original to the Office of Personnel Services.

CHECK ONE: ☐ NEW POSITION ☐ EXISTING POSITION

**Part I - Items 1 through 12 to be completed by department head or personnel office.**

|  |   |                                     |  |  |
|--|---|-------------------------------------|--|--|
| 1. Agency Name<br>Kansas Dept. for Children and Families                                   |   | 9. Position No.<br>K0164195         | 10. Budget Program Number  |  |
| 2. Employee Name (leave blank if position vacant)  |   |                                     | 11. Present Class Title (if existing position)<br>Management Systems Analyst I |  |
| 3. Division<br>Operations  |   |                                     | 12. Proposed Class Title   |  |
| 4. Section<br>Performance Improvement  | For<br><br>Use<br><br>By<br><br>Personnel<br><br>Office | 13. Allocation                      |  |  |
| 5. Unit<br>Putnam  |   | 14. Effective Date                  |  |  |
| 6. Location (address where employee works)<br><br>City Wichita County Sedgwick             |   | 15. By                              | Approved   |  |
| 7. (circle appropriate time)<br>Full time x Perm. x Inter.<br>Part time Temp. %            | Personnel<br><br>Office                                 | 16. Audit<br>Date: By:<br>Date: By: |  |  |
| 8. Regular hours of work: (circle appropriate time)<br><br>FROM: 8:00 AM/PM To: 5:00 AM/PM |   | 17. Audit<br>Date: By:<br>Date: By: |  |  |

Agency  
Number

Position  
Number

**PART II - To be completed by department head, personnel office or supervisor of the position.**

18. If this is a request to reallocate a position, briefly describe the reorganization, reassignment of work, new function added by law or other factors which changed the duties and responsibilities of the position:

19. Who is the supervisor of this position? (person who assigns work, gives directions, answers questions and is directly in charge)?

**Name**

**Title**

**Position Number**

Nan Putnam

Performance Improvement Administrator

K0056283

Who evaluates the work of an incumbent in this position?

**Name**

**Title**

**Position Number**

Nan Putnam

Performance Improvement Administrator

K0056283

20. a) How much latitude is allowed employee in completing the work? b) What kinds of instructions, methods and guidelines are given to the employee in this position to help do the work? c) State how and in what detail assignments are made.

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21. Describe the work of this position using the page or one additional page only. (Use the following format for describing job duties):

**What** is the action being done (use an action verb); to **whom** or **what** is the action directed (object of action); **why** is the action being done (be brief); **how** is the action being done (be brief). For each task state: Who reviews it? How often? What is it reviewed for?

**Number Each Task and Indicate Percent of Time and Identity each function as essential or marginal by placing an E or M next to the % of time for each task.** Essential functions are the primary job duties for which the position was created and that an employee must be able to perform, with or without reasonable accommodation. A marginal function is a peripheral, incident of minimal part of the position.

| No. Each Task and Indicate Percent of Time | E or M |  |
|--|--------|--|
| 25   | E      | Collects and tracks the Wichita Region daily data to support the EES Business Practice Model.  |
| 20   | E      | Uses Monarch software for data mining the System Archival Reports for DCF programs. In addition uses complex software, e.g. ArcGIS, to analyze and project customer needs in the community as requested. Responds to formal requests for data and reports. Prepares research reports in the form of formal presentations, geomaps, documents, and/or electronic media. |
| 10   | E      | Coordinates the implementation of new and revised work methods and processes in close cooperation with EES management. This includes documentation of the revised or new process.  |
| 15   | E      | Develop, update, and maintain Access database programs including the WRO Agreements Database program and the EES performance tracking databases. The position is also responsible to provide training to the staff using these systems.  |
| 20   | E      | Collects and analyzes data to evaluate EES programs and processes. Assists with identifying error trends, causal factors and process changes that improve performance. In addition, assists with tracking and analyzing work program providers performance including a cost analysis.  |
| 10   | E      | Provides support to the accounting department as needed.   |

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22. a. If work involves leadership, supervisory, or management responsibilities, check the statement which best describes the position:
- ( ) Lead worker assigns, trains, schedules, oversees, or reviews work of others.
  - ( ) Plans, staffs, evaluates, and directs work of employees of a work unit.
  - ( ) Delegates authority to carry out work of a unit to subordinate supervisors or managers.

- b. List the names, class titles, and position numbers of all persons who are supervised directly by employee on this position.

**Name**

**Title**

**Position Number**

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23. Which statement best describes the results of error in action or decision of this employee?

- ( ) Minimal property damage, minor injury, minor disruption of the flow of work.
- ( ) Moderate loss of time, injury, damage or adverse impact on healthy and welfare of others.
- ( ) Major program failure, major property loss, or serious injury or incapacitation.
- ( ) Loss of life, disruption of operations of a major agency.

Please give examples.

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24. For what purpose, with whom and how frequently are contacts made with the public, other employees or officials?

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25. What hazards, risks or discomforts exist on the job or in the work environment?

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26. List machines or equipment used regularly in the work of this position. Indicate the frequency with which they are used:

Personal Computer, Calculator, Telephone. All used daily.

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**PART III - To be completed by the department head or personnel office**

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27. List the minimum amounts of education and experience which you believe to be necessary for an employee to begin employment in this position.

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Education or Training - special or professional

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Licenses, certificates and registrations

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Special knowledge, skills and abilities

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Experience - length in years and kind

Three years of experience in collecting, evaluating, studying or reporting on statistical, economic, fiscal/budget, legislative or administrative data. Education may be substituted for experience as determined relevant by the agency

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**28. SPECIAL QUALIFICATIONS**

State any additional qualifications for this position that are necessary either as a physical requirement of an incumbent on the job, a necessary special requirement, a bona fide occupational qualification (BFOQ) or other requirement that does not contradict the education and experience statement on the class specification. A special requirement must be listed here in order to obtain selective certification.

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Signature of Employee

Date

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Signature of Personnel Official

Date

**Approved:**

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Signature of Supervisor

Date

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Signature of Agency Head or  
Appointing Authority

Date

